

Pomperaug District Department of Health
800 Main Street South, Suite 124
Southbury, CT 06488
(203) 264-9616

Rec # _____
Date _____
\$ Amount _____
Rec'd By _____

APPLICATION FOR SUBDIVISION REVIEW

This application shall apply to any and all divisions of land being reviewed for approval, including: free cuts, one time splits and subdivisions of three (3) lots or more. The number of lots is to include the existing structures, if any.

Name of subdivision _____

Address/ Location _____

General Information:

Proposed Number of Lots _____ Land Area _____

Public Sewer Septic System Public Water Private Well

Owner of record _____	Phone _____		
Address _____			
Street _____	Town _____	State _____	Zip _____

Applicant _____	Phone _____		
Address _____			
Street _____	Town _____	State _____	Zip _____

Engineer _____	Phone _____		
Address _____			
Street _____	Town _____	State _____	Zip _____

Applicant's Signature or Authorized Agent

Date

The completed application shall be submitted with:

1. Fees: A **\$250** application fee and a **\$250** per lot review fee.
2. A complete set of plans at no greater than 1" = 40' scale showing the house location, well, sanitary system and grading plan. Soil test locations (deep hole and percolation) shall be included and soil results reported for each lot.